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RECEIPTS FROM THE APPLICANT (*other than checked above*) :

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<input checked="" type="checkbox"/> Description <input checked="" type="checkbox"/> Claims <input checked="" type="checkbox"/> Abstract	<input type="checkbox"/> Information Disclosure Statement(s) Filed on : 1. <input type="checkbox"/> same as 371 request date 2. _____ 3. _____
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<input type="checkbox"/> Power of Attorney	<input checked="" type="checkbox"/> Oath/ Declaration (executed)
<input type="checkbox"/> Change of Address	<input type="checkbox"/> Oath/ Declaration <input type="checkbox"/> unsigned <input type="checkbox"/> no citizenship <input type="checkbox"/> other <input type="checkbox"/> DNA Diskette <input type="checkbox"/> Sequence Listing <input type="checkbox"/> Other : _____

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Date of Completion of DO/ EO 909 - Notification of Abandonment

Date of Completion of DO/ EO 916 - Notification of Defective Response

Date of Completion of DO/ EO 922 - Notification to Comply w/ Requirements for Patent

Applications Containing Nucleotide and/or Amino Acid Sequence Disclosures

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